



Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393
DC METRO AREA (202) 368-0123
INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.
CORRECT MARK: ●

FOR AGENCY USE ONLY

Door Practice: _____

10/3/01

Reference No. _____

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

ZIP CODE: 4

AREA CODE

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side) 1J4E478Y1T0380647

VEHICLE MAKE CHRYSLER

VEHICLE MODEL FRANCIS CHRYSLER

MANUFACTURE DATE _____

MODEL YEAR 1996

VEHICLE MANUFACTURER

SMW Ford Honda Nissan Subaru Volvo Other

Daimler-Chrysler General Motors Hyundai Isuzu Toyota VW

PURCHASE DATE _____

DEALER'S NAME _____

CITY _____

STATE _____

ZIP CODE _____

ENGINE SIZE 2.0

NO. CYLINDERS 4

FUEL SYSTEM Turbo Fuel Injection

FUEL TYPE Diesel Gas

TRANSMISSION TYPE Manual Automatic

ANTILOCK BRAKES Yes No

RESTRAINT SYSTEM Drive-side Airbag 2-Point Belt Passenger-side Airbag Vehicle Belt 3-Point Belt

CRUISE CONTROL Yes No

DRIVETRAIN Front 4-Wheel Rear

VEHICLE TYPE Car Minivan Truck Other

Van Sport Utility Motorcycle

DOORS 2-Door 4-Door

BODY STYLE Hatchback Sedan Station Wagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT Child Seat Electrical Lights & Alarms Engine & Cooling System Equipment Fuel System, Exhaust Hoses, Belts, Ventilation Interior Parking Brake Power Train Service Brakes Steering Structure Suspension Visual Systems Other _____

NO. OF FAILURES 1

INCIDENT DATE 9-6-01

MILEAGE AT INCIDENT 106,000

VEHICLE SPEED AT INCIDENT Starting from Stop

FAILED PART(S) Original Replacement

To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).

TIRE NAME BF Goodrich

COMPLETE TIRE SIZE _____

TIRE BRAND BF Goodrich Cooper Firestone Goodyear Kelly Springfield Michelin Yokohama Other _____

HANDICAPPED ADAPTIVE Yes No

FAILED PART(S) AVAILABLE? Yes No

NHTSA PREVIOUSLY CONTACTED? Yes No

APPLICABLE INCIDENT INFORMATION

Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.

CRASH Yes No

NUMBER OF PERSONS INJURED 0

CAUSE OF INCIDENT Wed./Comped/Rear Nasty Weak/Poor Fit/Loose Leaks Cut/Torn Short Disconnect/Fall OF Locks/Steer/Crabs Excessive Effort Excessive Effort Stability/Vibration Evolver

RESULT OF INCIDENT Explosion/Fire Loss of Control Poor Visibility Inadvertent Start Rollover Stalls Sudden Acceleration

FIRE Yes No

NUMBER OF FATALITIES 0

PLEASE DO NOT WRITE IN THIS AREA



04926

Visit www.nhtsa.gov for more information. EVERY TIME CRASH UP

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

I WAS ACCELERATING FROM STOP, ACCELERATOR LOCKIT
FELL THROTTLE. I THROTTLED
SWITCH OFF TO GET VEHICLE
STOPPED. EVERY START (AND)
ENGINE WOULD ROVER FALL
THROTTLE. I CRANKED ENGINE
IN NEUTRAL BUT ENGINE AGAIN
ACCELERATED TILL THROTTLE HAD
VEHICLE STARTED PULING AWAY
EVEN WITH TRANSMISSION LOCK
IN NEUTRAL. I MOVED THROTTLE
LEVERAGE & THEN RESTORED
ENGINE IN PARK AND VEHICLE
WAS NORMAL WITH EXCEPTION
OF NO REVERSE IN TRANSMISSION
AND IN ENGINE DRAKED IN
NEUTRAL TRANSMISSION WAS
ACTUALLY IN DRIVE. ALSO
NOTED THAT TRANSMISSION
DID NOT SHIFT TO OVERDRIVE
AFTER THIS INCIDENT. I
HAVE NOW HAD TRANSMISSION
RE-BUILT.

Continue on additional page if necessary.

Describe any additional incidents, (include date and mileage)

The Privacy Act of 1974 (Public Law 93-502) The information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with appropriate enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

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HS Form 350 (Rev. 8/95)

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

U.S. Department
of Transportation
National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Office: Business
Penalty for Private Use \$300

2000 (08202



Complete and return or place in your car manual for future use



VEHICLE OWNER'S QUESTIONNAIRE (V00Q)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration

www.nhtsa.dot.gov/hotline